SAO 440 (Rev. 8/01) Summons in a Civil Action

RETURN OF SERVICE					
	DATE				
Service of the Summons and complaint was made by r	2/11/00				
NAME OF SERVER <i>(PRINT)</i> Kimberly Walker	TITLE Legal Secretary	•			
Check one box below to indicate appropriate m	Legal Secretary ethod of service				
☐ Served personally upon the defendant. P					
Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein.					
Name of person with whom the summons	s and complaint were left:				
☐ Returned unexecuted:					
XX Other(specify): Certified Mail No. 7006 3450 0003 3097 3093					
	STATEMENT OF SERVICE FEES				
TRAVEL SERVIO		TOTAL \$0.00			
	DECLARATION OF SERVER	1 \$0.00			
Executed on	Signature of Server MILLER, FURTIS & WEIS P.O. BOX 8213	SBROD, L.L.P.			
	DALLAS, TX 75382	2-1329			
	Address of Server				

		And the second of the second o			

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United Sta	TES DISTR	ICT C OU	JRT	
Southern	District of		New York	
PAULINE HAMMERLY				
	S	SUMMONS	S IN A CIVIL AC	CTION
V. PROCTER & GAMBLE PHARMACEUTICALS, INC., AND AVENTIS PHARMACEUTICALS, INC.				
	CASE NU	MBER: 1:0	6-MD-1789 (JFK)	
	08	CV.	095	3
TO: (Name and address of Defendant)				
Aventis Pharmaceuticals, Inc. 200 Crossing Boulevard Bridgewater, NJ 08807				
YOU ARE HEREBY SUMMONED and rec		PLAINTIFF'S	ATTORNEY (name a	and address)
11551 Forest Central Drive, Su Dallas, Texas 75243	ine 300			
an answer to the complaint which is served on you wof this summons on you, exclusive of the day of servifor the relief demanded in the complaint. Any answ Clerk of this Court within a reasonable period of times.	ice. If you fail to do ver that you serve	o so, judgmer	it by default will be	ays after service taken against you be filed with the
J. MICHAEL McMAHO	DATE	,	JAN 2 9 2008	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece,	A. Signature X		
or on the front if space permits. 1. Article Addressed to: Corporation Service Company 80 State Street	D. Is delivery address different from item 1?		
Albany, NY 12207-2543 347959 KW 2/8/08 27MCW1299 Hammerly	3. Sepvice Type Certified Mail Registered Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes		
2. Article 1 7006 3450 0003 3097	2 3093		
PS Form 3811, August 2001 Domestic Retu	um Receipt 2ACPRI-03-Z-098		

U.S. Postal Service TM CERTIFIED MAIL THE RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

Postage \$

Certified Fee (Endorsement Required)

Restricted Delivery Fee (Endorsement Required)

Total F

Sent Tc Corporation Service Company

80 State Street

or POE Albany, NY 12207-2543

Gity. St. 347959 KW 2/8/08 27MCW1299 Hammerly

PS Form.

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